

PART B - FEE(S) TRANSMITTAL



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7590 08/26/2005

Friedrich Kueffner
317 Madison Avenue, Suite 910
New York, NY 10017

12/02/2005 MBELETE2 0000002 10647129

01 FC:2501 700.00 UP
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Friedrich Kueffner		(Depositor's name)
<i>F. Kueffner</i>		(Signature)
Nov. 28, 2005		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/647,129	08/22/2003	Michael Ermert	HM-529	1041

TITLE OF INVENTION: SOLENOID ARRANGEMENT

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$300	\$1000	11/28/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
DONOVAN, LINCOLN D	2832	335-220000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Friedrich Kueffner

2 _____

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Thomas Magnete GmbH

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

D-57562 Herdorf, Germany

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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Authorized Signature F. Kueffner

Date 11/28/2005

Typed or printed name Friedrich Kueffner

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